

Conclusion: The results suggest that loss-estimation models that do not take behavioral factors into account may overestimate projected casualty numbers. The present study shows the importance of raising public awareness regarding proper behavior prior to and during the event, which can help increase resilience of communities, mitigate risks and losses, and ultimately save lives.

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Development of a Disaster Mental Health Service Model and Expert Survey

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Study/Objective: The study objective is to understand the adequate development of a disaster mental health service model, and to find out the adequate relationship between disaster mental health services and disaster medical services.

Background: A disaster mental health service and organization system were activated after Sewol ferry ship sinking disaster in 2014 in Korea, the vision and planning for continuing development of disaster mental health supporting systems are still inadequate and lacking. So it is required to develop the method of connecting disaster mental health services and disaster medical services.

Methods: Researchers made and distributed the questionnaires for experts, including disaster mental health experts and disaster health medical experts. The answers to questionnaires were collected. Additionally, expert interviews were done for searching out the methods of a maturing disaster health medical system, and activating the connection between disaster mental health services and disaster medical services. Delphi analysis and AHP (Analytic Hierarchy Process) were used for questionnaire analysis.

Results: According to the questionnaire answers, developing a DPAT (Disaster Psychiatric Assistant Team), increased the number of existing certificates, and regularly, repeated training programs are necessary. The role should be stabilization and counseling in acute stages. The most important part of a multiple professional network was disaster medical experts.

Conclusion: According to the experts' opinions, DPAT should be prepared, the number of disaster health supporting personnel should be increased, and regular repeated training should be done for them.

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Forced Internal Displacement during Colombia's Five Decades of Armed Conflict: Trauma, Loss, and Psychopathology

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Study/Objective: Examine the high prevalence rates of symptom elevations for common mental disorders, by phase of displacement for Internally Displaced Persons (IDPs) in Colombia.

Background: Colombia is currently transitioning to post-conflict status, following 52 years of continuous armed conflict and widespread population exposure to violence from multiple sources. This insurgency is one of the world's most prolonged humanitarian emergencies. As officially designated "victims of the armed conflict," Colombia's 6.3 million IDPs have been exposed to trauma and loss throughout all phases of forced migration. The Outreach, Screening, and Intervention for Trauma (OSITA) pilot project used a three-tiered, stepped-care mental health intervention model for women IDPs who reside in Bogotá.

Methods: At baseline, the OSITA intervention assessed the study participants for exposures to 12 pre-, 18 peri-, and 13 post-displacement trauma and loss stressors. Using internationally standardized scales, the women were screened for three Common Mental Disorders (CMDs): Major Depressive Disorder (MDD), Generalized Anxiety Disorder (GAD), and Post Traumatic Stress Disorder (PTSD). Participants with symptom elevations were referred to Interpersonal Psychotherapy/Counseling (IPT/IPC).

Results: Data analysis examined baseline CMD symptom elevations in relation to exposures for 279 participants. On average, women IDPs endorsed 24 of 43 trauma and loss exposures. At enrollment, 51% had clinically significant symptom elevations for MDD; 41% for GAD; and 39% for PTSD. Fully 63% had at least one elevated scale including 26% who had elevations on all three clinical measures. Furthermore, 25% expressed thought or intention to self-harm ("suicidal risk"). Preliminary analysis of intervention effectiveness is underway and appear to demonstrate sharp declines in symptom levels.

Conclusion: In this highly-traumatized population, exposures to violence, armed conflict, and forced migration were universally experienced and strongly related to high prevalence rates of psychopathology. IPT/IPC results suggest that this intervention is effective and efficacious for this population.

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Disaster Management and Farm Family Mental Health: The BSE Crisis as a Case Study

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Study/Objective: To examine the evidence of depression among farmers four years after the bovine spongiform encephalopathy (BSE) disaster in Canada and report on implications for future disaster management strategies.

Background: As we approach the 14th anniversary of the 2003 BSE outbreak, evidence regarding its implications on the health of farmers is lacking. With disasters often linked to poor mental health, the BSE outbreak can be conceptualized as a disaster in slow motion. Systemic factors impacting farmer mental health are different from those affecting their non-farming rural neighbors. Therefore, disaster management strategies must